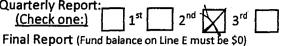


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REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES
CHECK APPROPRIATE BOXES—PLEASE TYPE OR PRINT IN BLACK INK

Quarterly Report: (Check one:)

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OCT 1 4 2021

State Board of Elections Springfield Office

REGERIAGIO

Amendment of the Report Indicated Above

Full name and complete mailing address of Political Committee:

Friends for Sam Snell c/o Sam Snell 1015 W Van Buren St Auburn, IL 62615-1300 **CHECK FOR ADDRESS CHANGE**

Committee ID: 18192

COMMITTEE ID #

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E-mail address:	CHECK FOR E-MAIL ADDRESS CHANGE			
REPORTING PERIOD CASH AVAILABLE AT BEGINNING OF REPORTING PERIOD: \$ 476.6 FROM THRU Repeat this amount in SECTION D, Line (A)	STATE BOARD OF ELECTIONS 2329 S MacARTHUR BLVD SPRINGFIELD, IL 62704-4503 STATE BOARD OF ELECTIONS STATE BOARD OF ELECTIONS CHICAGO, IL 60602-3026			
SECTION A — RECEIPTS	SECTION B — EXPENDITURES			
b. Not-Itemized: \$(1	6. Transfers Out a. Itemized (from Schedule B): \$(6a) b. Not-Itemized: \$(6b) 7. Loans Made a. Itemized (from Schedule B): \$ (7a)			
· · · · · · · · · · · · · · · · · · ·	a. Itemized (from Schedule B): \$(7a) b. Not-Itemized: \$(7b)			
3. Loans Received a. Itemized (from Schedule A): \$ (3	8. Expenditures a) a. Itemized (from Schedule B): \$			
4. Other Receipts a. Itemized (from Schedule A): \$ (4) b. Not-Itemized \$ (4)	9. Independent Expenditures a) ltemized (from Schedule B-9): \$ (9a) b) b. Not-Itemized \$ (9b)			
TOTAL RECEIPTS (1a thru 4b) \$(T	bo C			
**************************************	SECTION C — DEBTS AND OBLIGATIONS (Include previously reported unpaid debts)			
a. Itemized (from Schedule I): \$(5a b. Not-Itemized \$ (5b	· · · · · · · · · · · · · · · · · · ·			
TOTAL IN-KIND (5a + 5b) \$(TI ***********************************	SECTION D — CASH BALANCE Cash available at beginning of reporting period: \$ 176.66 (A)			
	Total Receipts from Section A (TR): \$ (B) Total cash (A) plus (B): \$ 476.61 (C)			
	Total Expenditures from Section B (TE): \$ 300 (D)			
	Funds available at close of reporting period (C minus D): \$ 437.6/ (E)			
	- Investments total (if applicable): \$ (F)			

VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND UP TO \$5000.

SIGNATURE OF COMMITTEE TREASURER OR CANDIDATE